

Membership agreement



I hereby apply for ACTIVE membership in the International Students of History Association (ISHA).

First name(s):

Surname:

Address: Street:

City: Country:

Date of birth: (DD/MM/YYYY)

E-mail:

I need to be a student of history or a related subject or have a distinct interest in the academic study of history as an academic field for my application to be valid.

Discipline:

University and city:

I am an alumnus:

If you are an alumnus, please enter the information of your last university and provide your current city of residence.

Is there already an ISHA section in your city? Yes No I don't know

Please note: If you chose "Yes" you will automatically become part of that section. If you chose "I don't know" you will be informed by ISHA whether there is a section, you can join.

If there is no ISHA Section in your city, by becoming an active member you pledge to do your best in trying to establish an ISHA Section in your city.

have read the statutes of ISHA and will not act against them.

I am aware that my active membership requires me to take part in at least one international event per year and transmitting the annual membership fee of 10 € to ISHA.

ISHA Account: (will be put in, as soon as we have a new one in Berlin)

The fee should be transferred together with your seminar fee for an international event. If you chose not to transfer the money via bank transfer, you must inform the Treasurer about your mode of payment.

I agree that my membership is converted to a passive membership automatically, should I not pay the fee or not attend any international events for 12 months. If you chose “No” your membership will expire instead of being converted to a passive membership. You will have to re-apply should you want to become a member again, passive or active.

Yes No

I have filled out everything according to my best knowledge truthfully and on my own.

The membership can be terminated without explanation upon written request by the member at any time. The membership can be terminated by ISHA in accordance with the statutes.

This document was filled out and sent electronically and is valid without signature.

Place and Date: